| 18/659278  |  |                                 |                                 |   |   |           |  |                        |           |                            |                        |         |       |        |    |
|--|--|---------------------------------|---------------------------------|---|---|-----------|--|------------------------|-----------|----------------------------|------------------------|---------|-------|--------|----|
| 9.5  | _ \  |                                 |                                 | .00                                       | Application or Docket Number                |           |  |                        |           |                            |                        |         |       |        |    |
| •  | PAYENT A                                       |                                 | ve January                      |   | ATION RECO                                  |           | 500309-80049                                 |                        |           |                            |                        |         |       |        |    |
|  |  | CLAIMS AS                       | Column 1                        |   | Xolumn 2)                                   |           | SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY |                        |           |                            |                        |         |       |        |    |
| TOTAL CLAIMS   |  |                                 | 38                              |   |   |           | RATE   |                        |           | RATE                       | FEE                    |         |       |        | •  |
| FOR  |  | NUMBER FILED                    |                                 | MUMBER EXTRA                              |   | BASIC FEE |  | OR                     | Basic Fee | 750.00                     |                        |         |       |        |    |
| TOTAL CHARGEABLE CLAIMS  |  | 3 g minus 20=                   |                                 | 18  | XS  | 9=        |  | OR                     | X\$18=    | 324.                       | y                      |         |       |        |    |
| INDEPENDENT CLAIMS   |  |                                 | minus 3 =                       |   | 1   | -X4       | 2=   |                        | OR        | X84=                       | 84,00                  |         |       |        |    |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |                                 |                                 |   |   | +14       | iO=  |                        | OR        | +280=                      |                        | .•      |       |        |    |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |                                 |                                 |   |   |           |  |                        | ]         | TOTAL                      | 1158                   | Po      |       |        |    |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)             |  |                                 |                                 |   |   |           |  | SMALL ENTITY           |           | OTHER THAN<br>SMALL ENTITY |                        |         |       |        |    |
|  | <u>-</u>                                       | CLAMS<br>REMAINING              | the last and debigued by A of a | NUMBER                                    |   | וֹ רֹ     |  | ADDI-                  | OR        |                            | ADDI-                  | ·       |       |        |    |
| MENDMENT A   |  | AFTER AMENOPERT                 |                                 | PREVIOUS<br>PAID FOR                      | LY EXTRA                                    | RA        | TE   | TIONAL<br>FEE          |           | RATE .                     | TIONAL                 |         |       |        |    |
| O ST   | Total  | . 0                             | Minus                           | - /                                       | •   | xs        | 9-   |                        | OR        | X\$18=                     |                        |         |       |        |    |
| SEC.   | Independent                                    | • ./                            | Minus                           | /   | •   | ×         | <b>2</b> ≈                                   |                        | OR        | X84=                       |                        |         | . ,   |        |    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |  |                                 |                                 |   |   |           | W=   |                        | OR        | +280=                      | <b>/</b>               |         |       | •      |    |
| 1.1  |  |                                 |                                 |   |   |           |  |                        | OR        | YOYAL<br>ADDIT, FEE        |                        |         |       | •      |    |
| 1/1/0/0 ((Soburn 1) (Column 2) (Column 3)                                |  |                                 |                                 |   |   |           |  |                        |           |                            |                        |         |       |        |    |
| MENDMENT B   |  | CLAMS REMAINING AFTER AMENDMENT |                                 | HIGHEST<br>NUMBER<br>PREVIOUS<br>PAID FOI | PRESENT<br>EXTRA                            | RA        | TE   | ADDI-<br>TIONAL<br>FEE |           | RATE                       | ADOI-<br>TIONAL<br>FEE |         |       |        |    |
| ğ  | Total  | • 8                             | Minus                           | <b>-</b> 3                                | 8 . 0,                                      | XS        | 8=   |                        | OR        | X\$18=                     | 1                      | -       |       |        |    |
| 18   | Independent                                    | • /                             | Minus                           | ***                                       | 4 - 0                                       | _ X4      | 2=   |                        | OR        | X84=                       |                        |         | •     |        |    |
| 尸  | FIRST PRESE                                    | NTATION OF M                    | C. /                            | /   | AIM   | 7         | 10°  |                        | OR        | +280=                      |                        | L.      |       | •      | •  |
| RCE+ Horest 1/09/06  |  |                                 |                                 |   |   |           |  |                        | OR        | ADOIT. FEE                 |                        | ,       | Ddc   | 7/2:   | To |
| <b> </b>   | :  | (Column 1)                      |                                 | (Column                                   |   | ۱         |  |                        | •         |                            |                        |         | nce.  | 7000   | 7  |
| MENDMENT C   |  | REMAINING<br>AFTER<br>AMENOMENT |                                 | NUMBER<br>PREVIOUS<br>PAID FO             | PRESENT<br>EXTRA                            | RA        | TE   | ADOI-<br>TIONAL<br>FEE |           | RATE                       | ADDI-<br>TIONAL<br>FEE | 79      | 0.00  | Felori | ,  |
|  | Total  | • 8                             | Minus                           | - 38                                      | -   | XŞ        | 9=   |                        | OR        | X\$18a                     |                        |         |       |        |    |
|  |  | • /                             | Minus                           | ENDERT C                                  | AM 17                                       | X         | 2=   |                        | OR        | X84=                       |                        |         |       |        |    |
| ۲  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |                                 |   |   |           | <b>\$0&gt;</b> .                             |                        | OR        | +280=                      |                        |         |       |        |    |
|  | Miles School Str.                              | ron 1 is less than I            | <b>~~</b> ₩ THUS                | SPICE Is is                               | es then 20, anter 7                         | 0         | OIAL   |                        | OR        | YOTAL<br>ADDIT: FEE        |                        | -79     | 10. M | )      |    |
|  | بكلا فمعطساكية هناه كالأ                       | andreas (Charles) (Charles)     | hade East Di TMS                | L SPACE In In                             | es than 3, enter "3."<br>In the highest num | -         | ,  | proprieto bo           | •         |                            |                        | <u></u> |       |        |    |
| <u></u>  |  |                                 |                                 |   |   |           | -  |                        | 10.00     | PARTMENT C                 | E (//4/2/ED/           | . لِ    |       |        |    |